SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of December 31, 2023

(Required by R.A. 6713) Note: Husband and wife who are both public officials and employees may file the required statements jointly or separately.

☐ Joint Filing ☐ Separate Filing ✓ Not Applicable MARTE ROMEL SECURITY GUARD I R POSITION: DECLARANT: (First Name) (M. I.) (Family Name) VISAYAS STATE UNIVERSITY AGENCY/OFFICE: Visca, Baybay City, Leyte OFFICE ADDRESS: ADDRESS BRGY. HIBUNAWAN BAYBAY CITY, LEYTE MARTE MARY CRHIS POSITION: N/A SPOUSE: (Family Name) (First Name) (M. I.) N/A AGENCY/OFFICE: N/A OFFICE ADDRESS: UNMARRIED CHILDREN BELOW EIGHTEEN (18) YEARS OF AGE LIVING IN DECLARANT'S HOUSEHOLD NAME DATE OF BIRTH AGE MAY 31, 2005 17 ELLA MAY C. MARTE N/A N/A N/A ASSETS, LIABILITIES AND NETWORTH (Including those of the spouse and unmarried children below eighteen (18) years of age living in declarant's household) **ASSETS** a. Real Properties* CURRENT FXACT DESCRIPTION KIND ASSESSED VALUE FAIR MARKET **ACQUISITION** LOCATION **VALUE ACQUISITION COST** (As found in the Tax Declaration of (e.g. lot, house and lot condominium and (e.g.residential. commercial, industrial, agricultural and mixed YEAR MODE improvements) BRGY. HIBUNAWAN 2008 170,000.00 HOUSE RESIDENTIAL 120,000.00 150,000.00 CASH BAYBAY CITY, LEYTE BRGY. HIBUNAWAN LOT 2008 CASH 200,000.00 RESIDENTIAL 100,000.00 200,000.00

b.	Personal	Properties*	

N/A

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/ AMOUNT
24" TELEVISION	2008	7,000.00
REFRIGERATOR	2009	12,000.00
WASHING MACHINE	2009	9,000.00
MOTORCYCLE	2020	72,000.00
	Subtotal	: P 100,000.00

N/A

BAYBAY CITY, LEYTE

N/A

2. LIABILITIES*

N/A

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE	
MPL	GSIS	16,779.11	
MPL	PAG-IBIG	12,744.27	
N/A	N/A	N/A	
		Demeal staff	

TOTAL LIABILITIES: 29,523.38 NETWORTH: Total Assets Less Total Liabilities = P 440,476.62

TOTAL ASSETS (a + b): ₱

N/A

N/A

Subtotal:

N/A

370,000.00

470,000.00

N/A

^{*}Additional sheet/s may be used, if necessary.

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

(of Declarant/ Declarant's spouse/ Unmarried Children Below Eighteen(18) years of Age Living in Declarant Household)

NAME OF ENTITY/BUSINESS ENTERPRISE	BUSINESS ADDRESS	NATURE OF BUSINESS INTEREST &/OR FINANCIAL CONNECTION	DATE OF ACQUISITION OF INTEREST OR CONNECTION
NONE	NONE	NONE	NONE
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RELATIVES IN THE GOVERNMENT SERVICE

(Within the Fourth Degree of Consanguinity or Affinity. Include also Bilas, Balae and Inso)

☑ I/ We do not know of any relavtive/s in the government service.

NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS
NONE	NONE	NONE	NONE
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I hereby certify that these are true and correct statements of my assets, liabilities, net worth, business interests and financial connections, including those of my spouse and unmarried children below eighteen (18) years of age living in my household, and that to the best of my knowledge, the above-enumerated are names of relatives in the government within fourth civil degree of consanguinity or affinity.

I hereby authorize the Ombudsman or his/her duly authorized representative to obtain and secure from all appropriate government agencies, including the Bureau of Internal Revenue such documents that may show my assets, liabilities, net worth, business interests and financial connections, to include those of my spouse and unmarried children below 18 years of age living with me in my household covering previous years to include the year I first assumed office in government.

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(Signature of Declarant)		(Signature	of Co-Declarant/Spouse)	
Government Issued ID: UMID		Government Issue	d ID: N/A	
ID No.:	CRM-0111-1909789-3	ID No.:	N/A	
Date Issued:		Date Issued:	N/A	
	ATENDE TO THE STATE OF THE STAT	1 5 APR 20	24	
SUBSCR	IBED AND SWORN to before me th	nis day of	_ 20, affiant exhibiting	to me th
above-stated g	government issued identification ca	ard.	\mathcal{M} .	
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(Person Administering Oath)